

SECRET

REPORTS INVENTORY						CONTROL NO. DDS/OF-146					
PREPARE IN DUPLICATE											
1. TITLE OF REPORT (If a fill-in report include Form No.) Financial Management Improvement Report (Feeder)						2. TYPE OF REPORT <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>STATISTICAL</td></tr> <tr><td><input checked="" type="checkbox"/> NARRATIVE</td></tr> <tr><td>MACHINE-NAME LISTING</td></tr> </table>		STATISTICAL	<input checked="" type="checkbox"/> NARRATIVE	MACHINE-NAME LISTING	
STATISTICAL											
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3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL					
		LOGISTICS		SECURITY		OTHER (specify)					
		MEDICAL		<input checked="" type="checkbox"/> FINANCE		<input checked="" type="checkbox"/> PPB					
4. NO. OF COPIES PREPARED 2		5. FREQUENCY (weekly, monthly, quarterly, etc.) Annual				6. DISTRIBUTION (No. of components not number of copies) 17					
7. FORMAT (memorandum, form computer print-out, etc) Memorandum		8. ADP PROCESSING <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>YES</td><td>IF YES GIVE ADP PROCESSING NO.</td></tr> <tr><td><input checked="" type="checkbox"/> NO</td><td></td></tr> </table>				YES	IF YES GIVE ADP PROCESSING NO.	<input checked="" type="checkbox"/> NO		9. DIRECTIVE AUTHORITY REQUIRING REPORT BOB Bulletin No. 70-13	
YES	IF YES GIVE ADP PROCESSING NO.										
<input checked="" type="checkbox"/> NO											
10. PREPARING COMPONENT (include lowest level contributing information to report) O/PPB				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)							
12. COST FACTORS											
A. MANUAL PREPARATION AND REVIEW COSTS											
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED = COST PER YEAR				
GS-16	\$ 12.76		6		\$76.56		1 \$ 76.56				
GS-06	3.50		1		3.50		1 3.50				
B. COSTS OF COMPUTER PRODUCED REPORTS											
TOTAL COSTS PER YEAR						\$ 80.06					
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.											
14. FUTURE GOALS											
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS					
<input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>MAN-HOURS</td> <td>DOLLARS</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		MAN-HOURS	DOLLARS		
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16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110080-7					18. EXTENSION				